

**IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA
IN AND FOR THE COUNTY OF _____**

In the Matter of the Petition of

(Petitioner)

**CONSENT TO ADOPTION OF INDIAN CHILD BY PARENT(S)
(IN OR OUT OF CALIFORNIA)**

NAME OF CHILD'S TRIBE

ROLL NUMBER OR OTHER EVIDENCE OF TRIBAL AFFILIATION

I/We, the undersigned, being the parent(s) of _____
(Name of Minor)

give my full and free consent to the adoption of said child by

_____,
(Name of Petitioners)

the petitioners. I/we understand that with the signing of this document I/we give up all my/our rights of custody, services, and earnings of said child and the consent will be binding with the signing of the decree of adoption unless I/we withdraw the consent before the decree of adoption is signed.

Said child was born on _____ Date _____ in _____ City and State _____.

DATE

Signed in the presence of:

SIGNATURE OF AUTHORIZED AGENCY REPRESENTATIVE

STATE

COUNTY

SIGNATURE OF MOTHER

SIGNATURE OF FATHER

FULL ADDRESS OF PARENT(S)

WITNESS SIGNATURE

STATE _____ COUNTY _____

WITNESS SIGNATURE

STATE _____ COUNTY _____

Signed in the presence of:

SIGNATURE OF REPRESENTATIVE: CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

COUNTY

CERTIFICATION

The terms and consequences of the voluntary signing of the consent, including the right to withdraw the consent prior to the signing of the decree of adoption, were fully explained to the parent(s) of this Indian child by the agency representative whose signature is affixed above, in my presence, and in a language understood by the parent(s).

DATE

SIGNATURE OF JUDGE

NAME OF COURT OF JURISDICTION